my conviction concerning the need for this basic form of education was one reason, when I was invited to join the faculty of the new McGill Centre for Advanced Studies in Primary Care (supported by the W.K. Kellogg Foundation, Battle Creek, MI), based at the Montreal General Hospital, to teach scientific communication, I accepted this offer with enthusiasm. This, I hope, demonstrates my conviction of the need for training in scientific communication; I hope that my efforts in this direction will not prove "a love's labour's lost"! — Ed.1

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Spurious results of Schilling tests with Frosst intrinsic factor

To the editor: We report a new cause of spurious results of Schilling tests functionally inert intrinsic factor (IF).

The Schilling test¹ is designed to study the intestinal absorption of vitamin B₁₂. If the vitamin is given alone and malabsorption is documented, a second Schilling test will be done in which both vitamin B₁₂ and IF are administered to determine whether a lack of IF or an ileal abnormality is the cause of the problem. When vitamin B₁₂ malabsorption is seen with this "second-stage" Schilling test, lengthy investigation of intestinal malabsorption, often including small-bowel biopsy, may be undertaken.

Recently we saw several abnormal results of second-stage Schilling tests in the Montreal area. All the tests had been done with hog IF supplied by Charles E. Frosst & Co., Montreal. We therefore conducted a study that demonstrated that the product sold as hog IF was in fact functionally inert.

Schilling tests were done between October 1976 and May 1977 in several patients suspected of having pernicious anemia. The sequence of the tests and the results are shown in Table I. In tests in which Frosst IF was used the capsule containing the IF was opened

Table I—Results of urinary excretion tests in patients with vitamin B₁₂ malabsorption

| Sequence of tests* | Patient no.; % excretion of vitamin B ₁₂ | | | | |
|----------------------------------|---|--------------------|--------------------|--------------------|--|
| | 1 | 2 | 3 | 4 | |
| No IF Frosst IF Lederle IF | 4.2 6.3 23.0 | 1.2 1.0 14.3 | 1.3 2.2 23.0 | 2.8 1.0 12.8 | |
| Frosst IF | 1.6 | 5.1 | ND† | ND† | |

*IF = intrinsic factor. †Not done.

and mixed with vitamin B₁₂ in water prior to administration.2 IF obtained from Lederle Company, Pearl River, New York was used as well. The last test with Frosst IF was done in two patients to rule out possible transient malabsorption of vitamin B₁₂ due to B₁₂ deficiency.³

We wish the Canadian medical community to be aware of this functionally inert IF preparation to prevent unnecessary investigation of intestinal malabsorption.

We have discussed the problem with Frosst officials and they have taken steps to withdraw the batch in question.

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Multiple sclerosis and milk

To the editor: A possible relation be-

tween multiple sclerosis (MS) and milk ingestion has been suggested. A recent report mentioned small-bowel abnormalities in MS, and the histologic findings in the jejunal mucosa of one of the subjects were said to "fit those seen in some cases of milk allergy".2

We studied the effect of a milk load (500 mL of boiled milk) on blood glucose and serum insulin concentrations determined by radioimmunoassay in 13 patients with MS (11 men and 2 women) and 8 control patients (6 men and 2 women). The diagnosis of MS had been established by neurologists. The patients with MS and the controls were bedridden and in the same hospitals.

We found no significant difference in mean concentrations of glucose or insulin between the two groups by Student's t-test (Table I). These results suggest that in the event that milk plays a role in the etiology of MS it does not do so through abnormal secretion of insulin.

This work was supported by the Mc-Donald-Stewart Foundation.

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Table I—Mean concentrations of blood glucose and serum insulin in 13 multiple sclerosis (MS) and 8 control patients after ingestion of 500 mL of boiled milk

| Time (min) | Blood glucose (mg/dL) | | Serum insulin (μU/mL) | |
|------------|-----------------------|----------|-----------------------|----------|
| | MS patients | Controls | MS patients | Controls |
| -5 | 82.0 | 83.0 | 6.7 | 7.7 |
| 0 | 81.9 | 83.8 | 6.9 | 7.8 |
| 15 | 90.0 | 86.4 | 14.3 | 12.8 |
| 30 | 93.3 | 93.7 | 30.5 | 26.9 |
| 60 | 90.2 | 86.7 | 26.6 | 21.1 |
| 90 | 85.9 | 91.4 | 19.5 | 21.6 |
| 120 | 86.5 | 91.2 | 12.4 | 14.5 |
| 180 | 85.9 | 87.0 | 8.5 | 13.3 |

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